

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>01/13/00</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>1/28/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>69300</i>	

INDEX OF CLAIMS

.....	Rejected	N	Non-elected
.....	Allowed	I	Interference
(Through numeral).....	Canceled	A	Appeal
.....	Restricted	O	Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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